

GREASE TRAP ANNUAL REPORT FOR _____

BUSINESS NAME _____

ADDRESS _____

TO BE COMPLETED AND SUBMITTED TO GEORGETOWN TOWNSHIP PUBLIC WORKS DEPARTMENT BETWEEN JANUARY 1 AND JANUARY 31, _____.

I HEREBY CERTIFY THAT SERVICE OF THE INDOOR AND/OR OUTDOOR GREASE TRAP WAS CONDUCTED AND RECORDED THROUGHOUT THE _____ CALENDAR YEAR AND THAT DETAIL RECORDS OF SUCH WILL BE ON SITE AT THE ABOVE ADDRESS. SERVICE RECORDS WILL BE KEPT AT THE ABOVE LOCATION FOR A PERIOD OF 3 YEARS.

I UNDERSTAND THAT THESE RECORDS MAY BE INSPECTED PERIODICALLY BY THE TOWNSHIP PUBLIC WORKS DEPARTMENT STAFF WITHOUT WARNING.

Signed by: _____ Title: _____
Printed Name

Signature: _____

Date: _____

VIOLATION OF THIS ORDINANCE IS PUNISHABLE OF A FINE UP TO \$500.00
(ORD. 150 ART. XX SECT. 2002)

Please send form to: Georgetown Township Public Works Department
P.O. Box 769
Jenison, MI 49429